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Supplemental Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD_R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	No
Computer Readable Form (CRF)?::	No
Title::	METHOD AND APPARATUS FOR HOLOGRAPHIC REFRACTOMETRY
Attorney Docket Number::	05822.0336USWO
Request For Early Publication::	No
Request For Non-Publication::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	4
Small Entity::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

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Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Sweden
Status:: Full Capacity
Given Name:: Mats
Middle Name::
Family Name:: GUSTAFSSON
Name Suffix::
City of Residence:: Malmö
State or Province of Residence::
Country of Residence:: Sweden
Street of mailing address:: ~~S Föstadsgatan 2~~ Fersens väg 16
City of mailing address:: Malmö
State or Province of mailing address::
Country of mailing address:: Sweden
Postal or Zip Code of mailing address:: ~~S-211 43~~ S-211 42

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Sweden
Status:: Full Capacity
Given Name:: Mikael
Middle Name::
Family Name:: SEBESTA
Name Suffix::
City of Residence:: Malmö
State or Province of Residence::
Country of Residence:: Sweden
Street of mailing address:: Stenbocksgatan 10 B

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City of mailing address:: Malmö
State or Province of mailing address::
Country of mailing address:: Sweden
Postal or Zip Code of mailing address:: S-211 50

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Sweden
Status:: Full Capacity
Given Name:: Peter
Middle Name::
Family Name:: EGELBERG
Name Suffix::
City of Residence:: Lund
State or Province of Residence::
Country of Residence:: Sweden
Street of mailing address:: Nordmannavägen 50
City of mailing address:: Lund
State or Province of mailing address::
Country of mailing address:: Sweden
Postal or Zip Code of mailing address:: S-224 75

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Sweden
Status:: Full Capacity
Given Name:: Thomas
Middle Name::

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Family Name:: LENART
Name Suffix::
City of Residence:: Lund
State or Province of Residence::
Country of Residence:: Sweden
Street of mailing address:: Kämnärsvägen 5D:112
City of mailing address:: Lund
State or Province of mailing address::
Country of mailing address:: Sweden
Postal or Zip Code of mailing address:: S-226 46

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Sweden
Status:: Full Capacity
Given Name:: Sven-Göran
Middle Name::
Family Name:: PETTERSSON
Name Suffix::
City of Residence:: Södra Sandby
State or Province of Residence::
Country of Residence:: Sweden
Street of mailing address:: Östervång 16
City of mailing address:: Södra Sandby
State or Province of mailing address::
Country of mailing address:: Sweden
Postal or Zip Code of mailing address:: S-247 32

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Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Sweden
Status:: Full Capacity
Given Name:: Bengt
Middle Name::
Family Name:: BENGTTSSON
Name Suffix::
City of Residence:: Veberöd
State or Province of Residence::
Country of Residence:: Sweden
Street of mailing address:: Bigarrågatan 1
City of mailing address:: Veberöd
State or Province of mailing address::
Country of mailing address:: Sweden
Postal or Zip Code of mailing address:: S-240 14

Correspondence Information

Correspondence Customer Number:: 23552

Representative Information

Representative Customer Number::	23552
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Domestic Priority Information

Application::	Continuation Type::	Parent Application::	Parent Filing Date::
This is a	National Stage of	PCT/SE2004/001437	10/07/2004

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Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Sweden	0302676-2	10/09/2003	Yes

Assignee Information

Assignee Name:: Phase Holographic Imaging PHI AB
Street of mailing address:: Nordmannavägen 50
City of mailing address:: Lund
State or Province of mailing address::
Country of mailing address:: Sweden
Postal or Zip Code of mailing address:: S-224 75

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